

DECLINATION OF CONTINUED SERVICE STATEMENT

For use of this form, see AR 601-280; the proponent agency is ODCSPER

_____, _____, _____, _____,
(Soldier's name) (SSN) (Rank) (Unit of assignment)

having incurred a service-remaining requirement under the provisions of Chapter 4, AR 601-280 as a result of _____,

and whose ETS date is _____, has been advised that in order to comply with the operational commitment,

he/she must have a minimum of _____ months remaining to ETS as of _____.

SECTION A - COUNSELING BY THE CAREER COUNSELOR (PMOS 79S)

1. The soldier has been advised as to the options available to acquire sufficient remaining service to satisfy the commitment, but has refused to take necessary action to meet the length of service. The soldier will initial in the space provided next to all career effects signifying understanding of that statement. Soldier has been advised that refusal to take action to comply with the operational commitment will have the following effects:

	I understand that I have no later than 45 days from the date of notification (<i>EDAS Transmittal Date</i>) to extend, reenlist or execute this statement.
	Placement in a nonpromotable status.
	Prohibited from reenlistment or extension of enlistment.
	Removal from promotion standing list (<i>if applicable</i>).
	Prohibited to apply for reentry into the Active Army for a period of at least 93 days if separated at normal ETS, and at least 2 years if voluntarily separated before ETS under para 16-5, AR 635-200.
	Required to receive a grade determination from HQDA, if approved for reentry into the Active Army.
	Prohibited from application, election, or attendance for commissioning or warrant officer programs while on the current period of active duty.
	Precluded from consideration by HQDA for centralized selection for promotion and/or advanced schooling.
	Eligible to request voluntary separation under the provisions of para 16-5, AR 635-200.
	You may be eligible to join the Reserve Component.
	You may be considered eligible for other assignments (<i>CONUS and OCONUS</i>) provided you have sufficient service remaining to meet the requirements of the new assignment.
	You are not eligible for separation pay.

a. TYPED NAME, RANK AND ORGANIZATION OF CAREER COUNSELOR	b. CAREER COUNSELOR'S SIGNATURE	
c. PLACE WHERE THE SOLDIER WAS ADVISED	d. DATE (YYYYMMDD)	e. TIME

SECTION B - SOLDIER'S ACKNOWLEDGEMENT OF COUNSELING

2. I hereby acknowledge that I have been counseled by the above career counselor concerning action required by me to satisfy a length-of-service requirement incident to an operational commitment, and regarding my refusal to extend my enlistment or reenlist to comply with the commitment. I understand the effects my refusal will have on my Army career and on any future decision I might make concerning reenlistment or enlistment after separation.

a. SOLDIER'S SIGNATURE	<input type="checkbox"/>	b. CHECK THIS BOX IF SOLDIER REFUSES TO SIGN ACKNOWLEDGMENT OF COUNSELING RECEIVED
c. TYPED NAME, RANK, AND BRANCH OF WITNESS	d. WITNESS' SIGNATURE	

SECTION C - COMMANDER'S/FIRST SERGEANT'S REVIEW

3. I have reviewed and discussed the above statement with the soldier and have determined that the soldier has been properly counseled. The soldier refused to take action to acquire sufficient service to comply with the operational commitment.

a. TYPED NAME, RANK, AND BRANCH OF COMMANDER/FIRST SERGEANT	b. COMMANDER'S/FIRST SERGEANT'S SIGNATURE
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